

ISSUE SLIP STAMP (For additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	JB		04-11-01
O.I.P.E. CLASSIFIER			5/1/01
FORMALITY REVIEW	JA	420	06-07-01
RESPONSE FORMALITY REVIEW	AP	110	10-04-01

# INDEX OF CLAIMS

..... Rejected  
 ..... Allowed  
 (Through numeral)..... Canceled  
 ..... Restricted  
 N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Date
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